

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

AMERICAN FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FU

ADDRESS (number and street) 1501 BROADWAY SUITE 600

PARAMOUNT BUILDING

Check if different than previously reported. (ACC) NEW YORK NY 10036

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00073627

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day **PRE**-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

- (d) 30-Day **Post**-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 07 01 2010 through 09 30 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. SAM FOLIO

Signature of Treasurer Electronically Filed by Mr. SAM FOLIO Date 10 14 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

AMERICAN FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FU

Report Covering the Period: From:    To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <input type="text" value="2010"/>		4514.79
(b) Cash on Hand at Beginning of Reporting Period .....	14241.80	
(c) Total Receipts (from Line 19) .....	6206.00	24466.69
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	20447.80	28981.48
7. Total Disbursements (from Line 31) .....	12509.99	21043.67
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	7937.81	7937.81
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

AMERICAN FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FU

Report Covering the Period: From:    To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	90.00	701.00
(ii) Unitemized .....	6116.00	23765.69
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	6206.00	24466.69
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	6206.00	24466.69
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	6206.00	24466.69
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	6206.00	24466.69

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	8759.99	12193.67
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	8759.99	12193.67
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3750.00	8850.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	12509.99	21043.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12509.99	21043.67

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	6206.00	24466.69
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6206.00	24466.69
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	8759.99	12193.67
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	8759.99	12193.67

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 12  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FU

**A.**

Full Name (Last, First, Middle Initial)

MR RAYMOND HAIR

Mailing Address 1109 SANDESTIN DRIVE

City State Zip Code  
DENTON TX 76205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
LOCAL 72-147 MUSICIAN

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 426.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 08 / 2010

Transaction ID: SA11AI.46246

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

MR RAYMOND HAIR

Mailing Address 1109 SANDESTIN DRIVE

City State Zip Code  
DENTON TX 76205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
LOCAL 72-147 MUSICIAN

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 436.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 08 / 2010

Transaction ID: SA11AI.46264

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

MR RAYMOND HAIR

Mailing Address 1109 SANDESTIN DRIVE

City State Zip Code  
DENTON TX 76205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
LOCAL 72-147 MUSICIAN

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 446.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 08 / 2010

Transaction ID: SA11AI.46300

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

40.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 7 / 12</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**AMERICAN FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FU**

**A.**

Full Name (Last, First, Middle Initial) MR RAYMOND HAIR		Date of Receipt MM / DD / YYYY 07 / 08 / 2010
Mailing Address 1109 SANDESTIN DRIVE		<b>Transaction ID:</b> SA11AI.46350
City DENTON	State TX	Zip Code 76205
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.00
Name of Employer LOCAL 72-147	Occupation MUSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 476.00	

**B.**

Full Name (Last, First, Middle Initial) BOB MCGREW		Date of Receipt MM / DD / YYYY 07 / 10 / 2010
Mailing Address 1501 BROADWAY SUITE 600		<b>Transaction ID:</b> SA11AI.46197
City NEW YORK	State NY	Zip Code 10036
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
Name of Employer AFM	Occupation LOCAL SECRETARY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	50.00
<b>TOTAL</b> This Period (last page this line number only) .....	90.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FU

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>BENTLEY HALL</b>	<b>Transaction ID:</b> SB21B.46966 Date of Disbursement 09 / 16 / 2010	
	Mailing Address 120 WALTON ST. SUITE 201		
	City SYRACUSE State NY Zip Code 13202	Amount of Each Disbursement this Period 585.90	
	Purpose of Disbursement PURCHASING ITEMS FOR AFM CONV'2010		
	Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>BENTLEY HALL</b>	<b>Transaction ID:</b> SB21B.46967 Date of Disbursement 09 / 16 / 2010	
	Mailing Address 120 WALTON ST. SUITE 201		
	City SYRACUSE State NY Zip Code 13202	Amount of Each Disbursement this Period 607.58	
	Purpose of Disbursement PURCHASING ITEM FOR RESALE		
	Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>OPTIMAL PAYMENTS(MONERIS)</b>	<b>Transaction ID:</b> SB21B.46504 Date of Disbursement 07 / 06 / 2010	
	Mailing Address P.O. BOX 6600		
	City HAGERSTOWN State MD Zip Code 21740	Amount of Each Disbursement this Period 44.95	
	Purpose of Disbursement		
	Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**1238.43**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FU

<b>A.</b>	Full Name (Last, First, Middle Initial) OPTIMAL PAYMENTS(MONERIS)	<b>Transaction ID:</b> SB21B.46505 <b>Date of Disbursement</b>	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	4		2	0	1	0														
	Mailing Address P.O. BOX 6600																						
	City HAGERSTOWN State MD Zip Code 21740		Amount of Each Disbursement this Period																				
	Purpose of Disbursement		44.95																				
	Candidate Name		44.95																				
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
	State: District:																						
<b>B.</b>	Full Name (Last, First, Middle Initial) OPTIMAL PAYMENTS(MONERIS)	<b>Transaction ID:</b> SB21B.46873 <b>Date of Disbursement</b>																					
	Mailing Address P.O. BOX 6600																						
	City HAGERSTOWN State MD Zip Code 21740		Amount of Each Disbursement this Period																				
	Purpose of Disbursement		44.95																				
	Candidate Name		44.95																				
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
	State: District:																						
<b>C.</b>	Full Name (Last, First, Middle Initial) PROFORMA	<b>Transaction ID:</b> SB21B.46964 <b>Date of Disbursement</b>																					
	Mailing Address P.O. BOX 640814																						
	City CINCINNATI State OH Zip Code 45264		Amount of Each Disbursement this Period																				
	Purpose of Disbursement PURCHASING ITEMS FOR RESALE		7431.66																				
	Candidate Name		7431.66																				
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
	State: District:																						

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

7521.56

**TOTAL** This Period (last page this line number only) ..... ►

8759.99

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FU

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>BERMAN FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.46941 Date of Disbursement 07 / 02 / 2010	
	Mailing Address 1719 NEW JERSEY AVENUE NW		
	City WASHINGTON State DC Zip Code 20001	Amount of Each Disbursement this Period	500.00
	Purpose of Disbursement ELECTION		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>COMMITTEE TO RE-ELECT HENRY HANK JOHNSON</b>	<b>Transaction ID:</b> SB23.46971 Date of Disbursement 07 / 02 / 2010	
	Mailing Address 6440 Old Hillandale Drive Suite 262		
	City Lithonia State GA Zip Code 30058	Amount of Each Disbursement this Period	250.00
	Purpose of Disbursement ELECTION		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>FRIENDS OF CONGRESSMAN GEORGE MILLER</b>	<b>Transaction ID:</b> SB23.46947 Date of Disbursement 07 / 02 / 2010	
	Mailing Address P.O. Box 5864		
	City Concord State CA Zip Code 94524	Amount of Each Disbursement this Period	500.00
	Purpose of Disbursement ELECTION		
	Candidate Name	Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: CA District: 07		

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1250.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FU

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>HODES FOR SENATE</b></p> <p>Mailing Address 26 SOUTH MAIN STREET #253</p> <p>City CONCORD State NH Zip Code 03301</p> <p>Purpose of Disbursement ELECTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p><b>Transaction ID:</b> SB23.46952 <b>Date of Disbursement</b> 09 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>LEAHY FOR U.S. SENATOR COMMITTEE</b></p> <p>Mailing Address PO BOX 1042</p> <p>City MONTPELIER State VT Zip Code 05601</p> <p>Purpose of Disbursement ELECTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: VT District: 00</p>	<p><b>Transaction ID:</b> SB23.46951 <b>Date of Disbursement</b> 07 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>NADLER FOR CONGRESS</b></p> <p>Mailing Address Village Station PO Box 40</p> <p>City New York State NY Zip Code 10014</p> <p>Purpose of Disbursement ELECTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p><b>Transaction ID:</b> SB23.46954 <b>Date of Disbursement</b> 09 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1250.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FU

A.	Full Name (Last, First, Middle Initial) <b>SCHIFF FOR CONGRESS</b> <hr/> Mailing Address 777 S. Figueroa St. Suite 4050 <hr/> City Los Angeles State CA Zip Code 90017 <hr/> Purpose of Disbursement ELECTION <hr/> Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 29 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.46955 Date of Disbursement 09 / 16 / 2010 <hr/> Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) <b>SENSENBRENNER COMMITTEE</b> <hr/> Mailing Address PO BOX 575 <hr/> City BROOKFIELD State WI Zip Code 53008 <hr/> Purpose of Disbursement ELECTION <hr/> Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 05 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.46956 Date of Disbursement 09 / 16 / 2010 <hr/> Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) <b>WOOLSEY FOR CONGRESS</b> <hr/> Mailing Address P.O. Box 750176 <hr/> City Petaluma State CA Zip Code 94975 <hr/> Purpose of Disbursement ELECTION <hr/> Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 06 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.46949 Date of Disbursement 07 / 02 / 2010 <hr/> Amount of Each Disbursement this Period 250.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1250.00

**TOTAL** This Period (last page this line number only) ..... ▶

3750.00